| Event Date | 10/03/2007 |
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| Page | |

Statement of Contributions Received at a Social or Fundraising Event

| Citizens for Lori Tyack Michael T. Irwin Mich | | Prescribed by Sec | cretary of State 3/05 | | · · · · · · · · · · · · · · · · · · · | | |
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| Name of Contributor | Name of Committee in Full | | | | | | |
| Michael T. Irwin | | | | | | | |
| | Full Name of Contributor | | | Registration Nun | Registration Number, if PAC | | |
| 280 S. State St | | | | | | | |
| State Zip Code Form(Cash, Check, etc) Check | Street Address | 1 | | 1 " 1 | | 44.00 | |
| Westerville | | | | | | 44.00 | |
| Name of Contributor BEW COPE | City | | · | | | | |
| BBW COPE | | <u> </u> | 43081 | | | | |
| Employer/Occupation/Labor Organization* | | | | Registration Nur | nber, if PAC | | |
| State Zip Code Co | | | | | | | |
| State D C 20001 Form(Cash, Check, etc) Check | Street Address | | | 1 1 | 1 1 | 250.00 | |
| Washington | | | | | | 250.00 | |
| Full Name of Contributor Edward J. Orlett Street Address 1620 E. Broad Ste, Apt 1603 City Columbus Full Name of Contributor Employer/Occupation/Labor Organization* State Columbus Form(Cash, Check, etc) Cash Registration Number, if PAC Amount 44.00 Amount At 4.00 Form(Cash, Check, etc) Cash Form(Cash, Check, etc) Cash Registration Number, if PAC Form(Cash, Check, etc) Cash Form(Cash, Check, etc) Cash Form(Cash, Check, etc) Cash Form(Cash, Check, etc) Cash Registration Number, if PAC Form(Cash, Check, etc) Columbus Form(Cash, Check, etc) Check Form(Cash, Check, e | City | | | • | | | |
| Clark Perdue Arnold & Scott LPA Street Address 471 E. Broad St, Ste 1400 Law Firm State Zip Code Form(Cash,Check,etc) Check Columbus Annount Annount Annount Columbus Columbus Columbus Full Name of Contributor Columbus Columbus Columbus M | | DC | 20001 | | | | |
| Street Address Employer/Occupation/Labor Organization* M D Y Amount 44.00 | | | | | nber, if PAC | | |
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| State Columbus C | | L 2 1 1 1 | | 1 ' 1 | | 44.00 | |
| Columbus | | | | | | 44.00 | |
| Full Name of Contributor Marlene Lynn Street Address Employer/Occupation/Labor Organization* State Address Employer/Occupation/Labor Organization* State Address Columbus Columbus Form(Cash,Check,ete) Cash Registration Number, if PAC Columbus Form(Cash,Check,ete) Cash Registration Number, if PAC Form(Cash,Check,ete) Cash Registration Number, if PAC State Address Employer/Occupation/Labor Organization* State Address Form(Cash,Check,ete) Columbus Form(Cash,Check,ete) Columbus Form(Cash,Check,ete) Check Registration Number, if PAC Form(Cash,Check,ete) Check Form(Cash,Check,ete) Form(Cash,Check,ete) Check Form(Cash,Check,ete) Form(Cash,Check,ete) Check Form(Cash,Check,ete) Form(Cash,Check,ete) Check Form(Cash,Check,ete) Form(Cash,Check,ete) | City | | 1 - | | | | |
| Marlene Lynn Street Address Employer/Occupation/Labor Organization* M D Q Q Q Q Q Q Q Q Q | | $10 \mid H$ | 43215 | | | | |
| Employer/Occupation/Labor Organization* | | | | Registration Nu | moer, ii PAC | | |
| City State Zip Code Columbus Columbus | | | | | 1 V Amount | | |
| $ \begin{array}{c ccccccccccccccccccccccccccccccccccc$ | Street Address | Employer/Occupation/Labor Organization* | | | i i | 44.00 | |
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| Full Name of Contributor Edward J. Orlett Street Address 1620 E. Broad Ste, Apt 1603 State Columbus Full Name of Contributor Peter Rogers Street Address 1609 Shelly Court City Columbus Employer/Occupation/Labor Organization* Employer/Occupation/Labor Organization* Employer/Occupation/Labor Organization* State Zip Code Registration Number, if PAC Form(Cash,Check,etc) Check Registration Number, if PAC Form(Cash,Check,etc) Check Columbus Four Columbus State City Columbus Four Cash,Check,etc) Columbus Four Cash,Check,etc) Check Registration Number, if PAC Form(Cash,Check,etc) Check Registration Number, if PAC Form(Cash,Check,etc) Check Registration Number, if PAC Form(Cash,Check,etc) Check Form(Cash,Check,etc) Form(Cash,Check,etc) City State Zip Code Form(Cash,Check,etc) | | 1 | Zip Code | l ' | | | |
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| $ \begin{array}{c ccccccccccccccccccccccccccccccccccc$ | | | | Registration Nu | moei, ii FAC | | |
| $ \begin{array}{c ccccccccccccccccccccccccccccccccccc$ | | 15 10 10 11 10 11 1 | | MID | V Amount | | |
| $ \begin{array}{c ccccccccccccccccccccccccccccccccccc$ | | Employer/Occupation/Labor Organization* | | 1 1 | | 50.00 | |
| $ \begin{array}{c ccccccccccccccccccccccccccccccccccc$ | | Ctata | 17in Code | | | 50.00 | |
| Full Name of Contributor Peter Rogers Street Address $1609 	ext{ Shelly Court}$ City Columbus Full Name of Contributor Registration Number, if PAC $1 	ext{ 0 } 1 	ext{ 1 } 5 	ext{ 0 } 7$ Amount $1 	ext{ 0 } 1 	ext{ 1 } 5 	ext{ 0 } 7$ 75.00 City Columbus Full Name of Contributor Ruth Silverman Street Address $715 	ext{ Gatehouse Lane}$ Employer/Occupation/Labor Organization* $1 	ext{ 0 } 0 	ext{ 9 } 0 	ext{ 7 } 7$ Amount $1 	ext{ 0 } 0 	ext{ 9 } 0 	ext{ 7 } 7$ 22.00 | B * | | - | 1 ' | | | |
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| $ \begin{array}{c ccccccccccccccccccccccccccccccccccc$ | | Employer/Occupation/Labor Organization* | | 1 1 | | 75.00 | |
| $ \begin{array}{c ccccccccccccccccccccccccccccccccccc$ | | State 7 in Code | | | | 70.00 | |
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| $ \begin{array}{c ccccccccccccccccccccccccccccccccccc$ | | | | | , | | |
| 715 Gatehouse Lane | | Employer/Occupation/Labor Organization* | | M D | Y Amount | | |
| City State Zip Code Form(Cash,Check,etc) | | Employer Occupation Labor Organization | | | | 22.00 | |
| City | | State Zip Code | | | | | |
| Columbus O H 43235 check | • · | 1 H 43235 | | , , | | | |
| Conditions | Columbus | | 1020 | 1. | | | |

Fill in the boxes below only on the last page for this event.

Transfer the Total contributions for this event to form No. 31-A. Under Full Name of Contributor state "Contributions from form No. 31-E" and list the date of the event in the date column.

| Total contributions this event | Total expenditures this event | Page Total \$ 529.00 |
|--------------------------------|-------------------------------|----------------------|
| | | |

^{*} Required for contributions from individuals over \$100 to statewide and general assembly candidates. If contributor is self-employed, the occupation and the name of the individual's business, if any, rather than employer should be listed. If two or more employees contribute via payroll deduction and exceed the aggregate of \$100, the labor organization of which the employees are members, if any, must appear. [R.C. 3517.10(B)(4)]